Best Available Copy

| FEE TRANSMITTAL | | | Complete If Known | | | | | | | |
|---|--|----------------------------------|----------------------|--------------|---------------------|------------------------|---|---|-----------|--|
| | | | Application Number | | | | Divisional of 09/525,580 | | | |
| for FY 2003 | | | Fning Date | | | | (concurrently herewith) | | | |
| Patent fees are subject to annual revision. | | | First Named Inventor | | . | Barss et al. | | | | |
| | | | Examiner Name | | | | · · | | | |
| Applicant claims small entity status. See 37CFR 1.27 | | | Art Uni | 1 | | | | | | |
| | | | America De ales Ale | | | · | 055,0003,0400 | | | |
| | | Attorney Docket No. | | | | DES/0003.0492 | | | | |
| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | | | | | | |
| Check Card Money Other None | | | DITION | | Entity | | | | | |
| Deposit Account | | Fee | Fee | Fee | Fee | • | Fee Des | scription | Fee Paid | |
| Deposit Account 03-1550 | | Code 1051 | (\$) 130 | Code 2051 | (\$) 65 | Surchar | ge - late filing foe or ceth | | | |
| Number Deposit Account Name Chernoff Vilhauer McClung & Stenzel | | 1052 | 50 | 2052 | 25 | Surchar | ge-late provisional filing fee or cover sheet | | | |
| The Commissioner is authorized to:(check all that apply) | | 1053 | 130 | 1053 | 130 | Non-Fre | glish specification | va ' | <u> </u> | |
| Charge fees indicated below Credit any overpayments | | 1812 | | 1812 | | | a request for e | - | | |
| Charge any additional fee(s) during the pendency of this application | | 1804 | 920* | 1804 | 920. | Request action | ting publication | | | |
| Charge any fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | 1805 | 1840* | 1805 | 1840° | Request action | ing publication | | | |
| | | 1251 | 140 | 2251 | 55 | Extensio | n for reply withi | | | |
| FEE CALCULATION | ON | 1252 | | 2252 | | - | | n second month | | |
| 1. BASIC FILING FEE Large Entity Small Entity Fee Descri | 55.4 | 1253 | | 2253 | | | n for reply within | | | |
| | ption Fee Paid | 1254 | 1,450 | ŀ | | _ | n for reply within | | | |
| | \$375 | 1255 | 1,970 | ı | | | in for reply within | ifth month | | |
| 1001 750 2001 375 Utility filling fer 1002 330 2002 165 Design filing f | | 1401 | | 2401 2402 | | Notice o | | · · · · · · · · · · · · · · · · · · · | | |
| 1003 520 2003 260 Plant filing fee | I | 1403 | | 2402 | | | brief in support of for oral hearing | • • | | |
| 1004 750 2004 375 Reissue filing | <u> </u> | 1451 | 1,510 | | | - | | lic use proceeding | - | |
| 1005 160 2005 80 Provisional fili | | 1452 | | 2452 | | | lo revive - unavo | • | | |
| SUBTOTAL (1) \$375 | | 1453 | 1,300 | | | | lo revive - uninte | | | |
| 1.00 | | 1501 | 1,300 | I | | | ue fee (or reiss | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | 1502 | | 2502 | | Design is | • | 1 | | |
| Fee from | | 1503 | 630 | 2503 | 315 | Plant iss | ue fee | | | |
| Extra Claims Total Claims 17 -20** = 0x | below Fee Paid | 4.400 | | | | • | | | | |
| Total Claims $17 - 20^{-4} = 0 \times 10^{-4}$ Indep. Claims $3 - 3^{-4} = 0 \times 10^{-4}$ | | 1460 1807 | - 1 | 1460 | | | to the Commis | | | |
| Multiple Dependent YES | 140 = \$140 | 1806 | | 1807 1806 | | | ing fee under 37 | | | |
| argo Entity Small Entity Fee Descri | <u> </u> | 8021 | | 8021 | | | | on Disclosure Stmt. ssignment per property | - | |
| Fee Fee Fee Code (\$) | • | 1809 | | | | (umes nu | imper or proper | ies) | \$40 | |
| 1202 18 2202 9 Claims in exces | j j | 1009 | /30 | 2809 | . 3/3 | (37. C.F.F | ubmission after R. 1.129(a)) | inal rejection | | |
| 12.1 | | 1810 | 750 | 281Ö- | 375 | For each CFR 1.12 | additional inver | ition to be examined (37 | | |
| 1203 280 2203 140 Multiple depend | ent claim, if not paid | 1801 | 750 | 2801 | | | | xamination (RCE) | | |
| 1204 84 2204 42 **Reissue indep original patent | endent claims over | 1802 | 900 | 1802 | 900 | Request application | for expedited ex | amination of a design | | |
| 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent" | | Other fee (specify) | | | | | | | | |
| SUBTOTAL (2) \$140 | | Reduced by Basic Filing Fee Paid | | | | aid | SUBTOTA | AL (3) | \$40 | |
| **or number of previously paid, if greater. F | | | | | | | | | | |
| SUBMITTED BY Vame (nint Vne) Donnie E Sterrel | | | | | | | | omplete (if applicable) | | |
| Vame (print type) Dennis E. Sten | Zei | Kegisti | ation N | (0. | 28,7 | /63 | Telephone | (503) 227-56 | 31 | |
| organizate (| | A | | | | Chala | | | | |